

ARIZONA CORPORATION COMMISSION
UTILITIES DIVISION

ANNUAL REPORT MAILING LABEL – MAKE CHANGES AS NECESSARY

W-02486A

JACKSON SPRING ESTATES HOME AND PROPERTY OWNERS ASSOCIATION
6139 E. HERMOSEA VISTA DR.
MESA, AZ 85215

ANNUAL REPORT
Water

FOR YEAR ENDING

12	31	2010
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FOR COMMISSION USE

ANN 04	10
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3-16-11

COMPANY INFORMATION

Company Name (Business Name) JACKSON SPRING ESTATES HOME AND PROPERTY OWNERS ASSOCIATION

Mailing Address 6139 E. HERMOSA VISTA DR.
(Street)

MEJA
(City)

AZ
(State)

85215
(Zip)

480 396 2718
Telephone No. (Include Area Code)

—
Fax No. (Include Area Code)

480 540 1683
Cell No. (Include Area Code)

Email Address nmcoes@netscape.com

Local Office Mailing Address SAME AS ABOVE
(Street)

(City)

(State)

(Zip)

Local Office Telephone No. (Include Area Code)

Fax No. (Include Area Code)

Cell No. (Include Area Code)

Email Address _____

MANAGEMENT INFORMATION

☐ **Regulatory Contact:**

☒ **Management Contact:** WILLIAM H. JOHNSTON PRESIDENT
(Name) (Title)

PO BOX 472
(Street)

ALPINE
(City)

AZ 85910
(State) (Zip)

928 339 4047
Telephone No. (Include Area Code)

—
Fax No. (Include Area Code)

602 908 0193
Cell No. (Include Area Code)

Email Address billinda@johnstoncentral.com

On Site Manager: SAME AS ABOVE
(Name)

(Street)

(City)

(State)

(Zip)

Telephone No. (Include Area Code)

Fax No. (Include Area Code)

Cell No. (Include Area Code)

Email Address _____

Statutory Agent: WILLIAM H. JOHNSTON
(Name)

PO BOX 472 ALPINE AZ 85920-0472
(Street) (City) (State) (Zip)

928 339 4047 602 908 0193
Telephone No. (Include Area Code) Fax No. (Include Area Code) Cell No. (Include Area Code)

Attorney: _____
(Name)

(Street) (City) (State) (Zip)

Telephone No. (Include Area Code) Fax No. (Include Area Code) Cell No. (Include Area Code)

Email Address _____

OWNERSHIP INFORMATION

Check the following box that applies to your company:

- | | |
|---|---|
| <input type="checkbox"/> Sole Proprietor (S) | <input type="checkbox"/> C Corporation (C) (Other than Association/Co-op) |
| <input type="checkbox"/> Partnership (P) | <input type="checkbox"/> Subchapter S Corporation (Z) |
| <input type="checkbox"/> Bankruptcy (B) | <input type="checkbox"/> Association/Co-op (A) |
| <input type="checkbox"/> Receivership (R) | <input type="checkbox"/> Limited Liability Company |
| <input checked="" type="checkbox"/> Other (Describe) <u>HOMECOWNERS ASSOCIATION</u> | |

COUNTIES SERVED

Check the box below for the county/ies in which you are certificated to provide service:

- | | | |
|--|-----------------------------------|-----------------------------------|
| <input checked="" type="checkbox"/> APACHE | <input type="checkbox"/> COCHISE | <input type="checkbox"/> COCONINO |
| <input type="checkbox"/> GILA | <input type="checkbox"/> GRAHAM | <input type="checkbox"/> GREENLEE |
| <input type="checkbox"/> LA PAZ | <input type="checkbox"/> MARICOPA | <input type="checkbox"/> MOHAVE |
| <input type="checkbox"/> NAVAJO | <input type="checkbox"/> PIMA | <input type="checkbox"/> PINAL |
| <input type="checkbox"/> SANTA CRUZ | <input type="checkbox"/> YAVAPAI | <input type="checkbox"/> YUMA |
| <input type="checkbox"/> STATEWIDE | | |

COMPANY NAME JACKSON SPRING ESTATES HOME AND PROPERTY OWNERS
ASSN

UTILITY PLANT IN SERVICE

Acct. No.	DESCRIPTION	Original Cost (OC)	Accumulated Depreciation (AD)	O.C.L.D. (OC less AD)
301	Organization			
302	Franchises			
303	Land and Land Rights	4 000		
304	Structures and Improvements	16 450	10 564	(4 114)
307	Wells and Springs	3 900	4 875	(975)
311	Pumping Equipment	25 000	31 250	(6 250)
320	Water Treatment Equipment			
330	Distribution Reservoirs and Standpipes			
331	Transmission and Distribution Mains			
333	Services			
334	Meters and Meter Installations			
335	Hydrants			
336	Backflow Prevention Devices			
339	Other Plant and Misc. Equipment			
340	Office Furniture and Equipment	81 000	101 250	(20 250)
341	Transportation Equipment			
343	Tools, Shop and Garage Equipment			
344	Laboratory Equipment			
345	Power Operated Equipment			
346	Communication Equipment			
347	Miscellaneous Equipment			
348	Other Tangible Plant			
	TOTALS	130 350	157 939	(31 589)

This amount goes on the Balance Sheet Acct. No. 108

COMPANY NAME JACKSON SPRING ESTATES HOME AND PROPERTY OWNERS ASSN

CALCULATION OF DEPRECIATION EXPENSE FOR CURRENT YEAR

Acct. No.	DESCRIPTION	Original Cost (1)	Depreciation Percentage (2)	Depreciation Expense (1x2)
301	Organization			
302	Franchises			
303	Land and Land Rights	4 000		
304	Structures and Improvements	16 450	5%	823
307	Wells and Springs	3 900	5%	195
311	Pumping Equipment	25 000	5%	1 250
320	Water Treatment Equipment			
330	Distribution Reservoirs and Standpipes			
331	Transmission and Distribution Mains			
333	Services			
334	Meters and Meter Installations			
335	Hydrants			
336	Backflow Prevention Devices			
339	Other Plant and Misc. Equipment	81 000	5%	4 050
340	Office Furniture and Equipment			
341	Transportation Equipment			
343	Tools, Shop and Garage Equipment			
344	Laboratory Equipment			
345	Power Operated Equipment			
346	Communication Equipment			
347	Miscellaneous Equipment			
348	Other Tangible Plant			
	TOTALS	130 350		6 318

This amount goes on the Comparative Statement of Income and Expense _____
Acct. No. 403.

COMPANY NAME JACKSON SPRING ESTATES HOME AND PROPERTY OWNERS ASSN.

BALANCE SHEET

Acct No.	ASSETS	BALANCE AT BEGINNING OF YEAR	BALANCE AT END OF YEAR
	CURRENT AND ACCRUED ASSETS		
131	Cash	\$ 21 867	\$ 23 998
134	Working Funds		
135	Temporary Cash Investments		
141	Customer Accounts Receivable		
146	Notes/Receivables from Associated Companies		
151	Plant Material and Supplies		
162	Prepayments		
174	Miscellaneous Current and Accrued Assets		
	TOTAL CURRENT AND ACCRUED ASSETS	\$ 21 867	\$ 23 998
	FIXED ASSETS		
101	Utility Plant in Service	\$ 126 350	\$ 126 350
103	Property Held for Future Use		
105	Construction Work in Progress		
108	Accumulated Depreciation – Utility Plant	151 621	157 939
121	Non-Utility Property		
122	Accumulated Depreciation – Non Utility	(25 271)	(31 589)
	TOTAL FIXED ASSETS	\$	\$
	TOTAL ASSETS	\$ (3404)	\$ (7591)

NOTE: The Assets on this page should be equal to **Total Liabilities and Capital** on the following page.

COMPANY NAME JACKSON SPRING ESTATES HOME AND PROPERTY OWNERS ASSOCIATION

BALANCE SHEET (CONTINUED)

Acct. No.		BALANCE AT BEGINNING OF YEAR	BALANCE AT END OF YEAR
	LIABILITIES		
	CURRENT LIABILITIES		
231	Accounts Payable	\$	\$
232	Notes Payable (Current Portion)		
234	Notes/Accounts Payable to Associated Companies		
235	Customer Deposits		
236	Accrued Taxes		
237	Accrued Interest		
241	Miscellaneous Current and Accrued Liabilities		
	TOTAL CURRENT LIABILITIES	\$ 0	\$ 0
	LONG-TERM DEBT (Over 12 Months)		
224	Long-Term Notes and Bonds	\$ 0	\$ 0
	DEFERRED CREDITS		
251	Unamortized Premium on Debt	\$	\$
252	Advances in Aid of Construction		
255	Accumulated Deferred Investment Tax Credits		
271	Contributions in Aid of Construction		
272	Less: Amortization of Contributions		
281	Accumulated Deferred Income Tax		
	TOTAL DEFERRED CREDITS	\$ 0	\$ 0
	TOTAL LIABILITIES	\$	\$
	CAPITAL ACCOUNTS		
201	Common Stock Issued	\$	\$
211	Paid in Capital in Excess of Par Value		
215	Retained Earnings		
218	Proprietary Capital (Sole Props and Partnerships)		
	TOTAL CAPITAL	\$ 0	\$ 0
	TOTAL LIABILITIES AND CAPITAL	\$ 0	\$ 0

COMPANY NAME JACKSON SPRING ESTATES HOME AND PROPERTY OWNERS ASSN.

COMPARATIVE STATEMENT OF INCOME AND EXPENSE

Acct. No.	OPERATING REVENUES	PRIOR YEAR	CURRENT YEAR
461	Metered Water Revenue	\$ 0	\$
460	Unmetered Water Revenue	4100	4072
474	Other Water Revenues		150
	TOTAL REVENUES	\$ 4100	\$ 4222
	OPERATING EXPENSES		
601	Salaries and Wages	\$	\$
610	Purchased Water		
615	Purchased Power	500	500
618	Chemicals		
620	Repairs and Maintenance	105	0
621	Office Supplies and Expense	26	23
630	Outside Services		
635	Water Testing	128	88
641	Rents		
650	Transportation Expenses		
657	Insurance – General Liability	928	1008
659	Insurance - Health and Life		
666	Regulatory Commission Expense – Rate Case		
675	Miscellaneous Expense	210	175
403	Depreciation Expense	6318	6318
408	Taxes Other Than Income	236	234
408.11	Property Taxes	0	443
409	Income Tax		
	TOTAL OPERATING EXPENSES	\$ 8451	\$ 8789
	OPERATING INCOME/(LOSS)	\$	\$
	OTHER INCOME/(EXPENSE)		
419	Interest and Dividend Income	\$	\$
421	Non-Utility Income	500	500
426	Miscellaneous Non-Utility Expenses		
427	Interest Expense		
	TOTAL OTHER INCOME/(EXPENSE)	\$ 500	\$ 500
	NET INCOME/(LOSS)	\$ (3851)	\$ (4067)

COMPANY NAME JACKSON SPRING ESTATES HOME AND PROPERTY OWNERS ASSN

SUPPLEMENTAL FINANCIAL DATA
Long-Term Debt

	LOAN #1	LOAN #2	LOAN #3	LOAN #4
Date Issued				
Source of Loan				
ACC Decision No.				
Reason for Loan				
Dollar Amount Issued	\$	\$	\$	\$
Amount Outstanding	\$	\$	\$	\$
Date of Maturity				
Interest Rate	%	%	%	%
Current Year Interest	\$	\$	\$	\$
Current Year Principle	\$	\$	\$	\$

Meter Deposit Balance at Test Year End

\$ 0

Meter Deposits Refunded During the Test Year

\$ 0

COMPANY NAME	JACKSON SPRING ESTATES HOME AND PROPERTY OWNERS ASSN
Name of System:	ADEQ Public Water System Number:

WATER COMPANY PLANT DESCRIPTION

WELLS

ADWR ID Number*	Pump Horsepower	Pump Yield (gpm)	Casing Depth (Feet)	Casing Diameter (Inches)	Meter Size (inches)	Year Drilled
040105	1 1/2	25	6			

* Arizona Department of Water Resources Identification Number

OTHER WATER SOURCES

Name or Description	Capacity (gpm)	Gallons Purchased or Obtained (in thousands)
NA		

BOOSTER PUMPS		FIRE HYDRANTS	
Horsepower	Quantity	Quantity Standard	Quantity Other
	2		

STORAGE TANKS		PRESSURE TANKS	
Capacity	Quantity	Capacity	Quantity
15,000	1		

Note: If you are filing for more than one system, please provide separate sheets for each system.

COMPANY NAME JACKSON SPRING ESTATES HOME AND PROPERTY OWNERS ASSN.
Name of System: ADEQ Public Water System Number:

WATER COMPANY PLANT DESCRIPTION (CONTINUED)

MAINS		
Size (in inches)	Material	Length (in feet)
2		
3		
4	PVC	APPROX 2000
5		
6	PVC	APPROX 2000
8		
10		
12		

CUSTOMER METERS	
Size (in inches)	Quantity
5/8 X 3/4	
3/4	
1	
1 1/2	
2	
Comp. 3	NONE
Turbo 3	
Comp. 4	
Turbo 4	
Comp. 6	
Turbo 6	

For the following three items, list the utility owned assets in each category for each system.

TREATMENT EQUIPMENT:

	ELECTRIC METERING PUMP
	10 GAL. TANK & COVER

STRUCTURES:

	FRAME PUMP HOUSE 24'6" X 34'6"

OTHER:

Note: If you are filing for more than one system, please provide separate sheets for each system.

COMPANY NAME: JACKSON SPRING ESTATES HOME AND PROPERTY OWNERS ASSN	
Name of System:	ADEQ Public Water System Number:

WATER USE DATA SHEET BY MONTH FOR CALENDAR YEAR 2010

MONTH	NUMBER OF CUSTOMERS	GALLONS SOLD (Thousands)	GALLONS PUMPED (Thousands)	GALLONS PURCHASED (Thousands)
JANUARY	14		.503	
FEBRUARY	14		.371	
MARCH	14		.628	
APRIL	14		.992	
MAY	14	NA	8.024	NA
JUNE	14		7.811	
JULY	14		5.025	
AUGUST	15		2.102	
SEPTEMBER	15		3.255	
OCTOBER	15		1.745	
NOVEMBER	15		1.933	
DECEMBER	15		.406	
TOTALS →			33.3	

What is the level of arsenic for each well on your system? _____ mg/l *TESTING NOT REQUIRED*
(If more than one well, please list each separately.) *DUE TO LIMITED CUSTOMERS*

If system has fire hydrants, what is the fire flow requirement? _____ GPM for _____ hrs

If system has chlorination treatment, does this treatment system chlorinate continuously?

☒ Yes () No

Is the Water Utility located in an ADWR Active Management Area (AMA)?

() Yes ☒ No

Does the Company have an ADWR Gallons Per Capita Per Day (GPCPD) requirement?

() Yes ☒ No

If yes, provide the GPCPD amount: _____

Note: If you are filing for more than one system, please provide separate data sheets for each system.

COMPANY NAME: JACKSON SPRING ESTATES HOME AND PROPERTY OWNERS ASSN,
Name of System: _____ ADEQ Public Water System Number: _____

UTILITY SHUTOFFS / DISCONNECTS

MONTH	Termination without Notice R14-2-410.B	Termination with Notice R14-2-410.C	OTHER
JANUARY			
FEBRUARY			
MARCH			
APRIL			
MAY	N/A		
JUNE			
JULY			
AUGUST			
SEPTEMBER			
OCTOBER			
NOVEMBER			
DECEMBER			
TOTALS →			

OTHER (description):

COMPANY NAME JACKSON SPRING ESTATES HOME AND YEAR ENDING 12/31/2010
PROPERTY OWNERS ASSN.

PROPERTY TAXES

Amount of actual property taxes paid during Calendar Year 2010 was: \$ 443,18

Attach to this annual report proof (e.g. property tax bills stamped "paid in full" or copies of cancelled checks for property tax payments) of any and all property taxes paid during the calendar year.

If no property taxes paid, explain why. _____

09F 55457
JACKSON SPRING ESTATES
HOME & PROPERTY OWNERS ASSOC.
P.O. BOX 20394
MESA, AZ 85277 0394
11-22-2007
277
Date March 18, 2010
Pay to the
Order of Katherine D. Arvin, Spk. C. Treas. \$ 244.70
One Hundred Forty Four & 70/100
Wells Fargo Bank, N.A.
1 E. 16th St.
Mesa, AZ 85304
wellsfargo.com
MEMO 942-50-702 3 Dea M. Coates
⑆ 122105278⑆0808750269⑆ 0277

REF#0388108432 CK# 277 244.70

10F 55688
JACKSON SPRING ESTATES
HOME & PROPERTY OWNERS ASSOC.
P.O. BOX 20394
MESA, AZ 85277 0394
11-22-2007
313
Date Oct 1, 2010
Pay to the
Order of Katherine D. Arvin, Spk. C. Treas. \$ 198.48
One Hundred Ninety Eight & 48/100
Wells Fargo Bank, N.A.
1 E. 16th St.
Mesa, AZ 85304
wellsfargo.com Full year taxes
MEMO 942-50-702 3 Dea M. Coates
⑆ 122105278⑆0808750269⑆ 0313

REF#0287841286 CK# 313 198.48

**VERIFICATION
AND
SWORN STATEMENT
Taxes**

VERIFICATION

STATE OF ARIZONA

I, THE UNDERSIGNED
OF THE

COUNTY OF (COUNTY NAME)
<u>APACHE</u>
NAME (OWNER OR OFFICIAL) TITLE
<u>NEVA M. COESTER, SECT. / TREAS.</u>
COMPANY NAME
<u>JACKSON SPRING ESTATES HOME AND PROPERTY OWNERS ASSOCIATION</u>

DO SAY THAT THIS ANNUAL UTILITY PROPERTY TAX AND SALES TAX REPORT TO THE ARIZONA CORPORATION COMMISSION

FOR THE YEAR ENDING

MONTH	DAY	YEAR
12	31	2010

HAS BEEN PREPARED UNDER MY DIRECTION, FROM THE ORIGINAL BOOKS, PAPERS AND RECORDS OF SAID UTILITY; THAT I HAVE CAREFULLY EXAMINED THE SAME, AND DECLARE THE SAME TO BE A COMPLETE AND CORRECT STATEMENT OF BUSINESS AND AFFAIRS OF SAID UTILITY FOR THE PERIOD COVERED BY THIS REPORT IN RESPECT TO EACH AND EVERY MATTER AND THING SET FORTH, TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

SWORN STATEMENT

I HEREBY ATTEST THAT ALL PROPERTY TAXES FOR SAID COMPANY ARE CURRENT AND PAID IN FULL.

I HEREBY ATTEST THAT ALL SALES TAXES FOR SAID COMPANY ARE CURRENT AND PAID IN FULL.

Neva M. Coester

SIGNATURE OF OWNER OR OFFICIAL

480 396 2718

TELEPHONE NUMBER

SUBSCRIBED AND SWORN TO BEFORE ME

A NOTARY PUBLIC IN AND FOR THE COUNTY OF

THIS

10th

DAY OF



MY COMMISSION EXPIRES July 1, 2012

COUNTY NAME
<u>MARICOPA</u>
MONTH
<u>March</u>
YEAR
<u>2011</u>

[Signature]
SIGNATURE OF NOTARY PUBLIC

COMPANY NAME JACKSON SPRING ESTATES HOME AND **YEAR ENDING 12/31/2010**
PROPERTY OWNERS ASSOCIATION
INCOME TAXES

For this reporting period, provide the following:

Federal Taxable Income Reported 0
Estimated or Actual Federal Tax Liability 0

State Taxable Income Reported 0
Estimated or Actual State Tax Liability 0


Amount of Grossed-Up Contributions/Advances:

Amount of Contributions/Advances 0
Amount of Gross-Up Tax Collected 0
Total Grossed-Up Contributions/Advances 0

Decision No. 55774 states, in part, that the utility will refund any excess gross-up funds collected at the close of the tax year when tax returns are completed. Pursuant to this Decision, if gross-up tax refunds are due to any Payer or if any gross-up tax refunds have already been made, attach the following information by Payer: name and amount of contribution/advance, the amount of gross-up tax collected, the amount of refund due to each Payer, and the date the Utility expects to make or has made the refund to the Payer.

CERTIFICATION

The undersigned hereby certifies that the Utility has refunded to Payers all gross-up tax refunds reported in the prior year's annual report. This certification is to be signed by the President or Chief Executive Officer, if a corporation; the managing general partner, if a partnership; the managing member, if a limited liability company or the sole proprietor, if a sole proprietorship.

<u>SIGNATURE</u>		<u>DATE</u>
<u>PRINTED NAME</u>		<u>TITLE</u>

**VERIFICATION
AND
SWORN STATEMENT
Intrastate Revenues Only**

VERIFICATION

STATE OF ARIZONA

I, THE UNDERSIGNED

OF THE

COUNTY OF (COUNTY NAME) <u>APACHE</u>
NAME (OWNER OR OFFICIAL) TITLE <u>NEVA M. COESTER, SECY. / TREAS.</u>
COMPANY NAME <u>JACKSON SPRING ESTATES HOME AND PROPERTY OWNERS ASSOCIATION</u>

DO SAY THAT THIS ANNUAL UTILITY REPORT TO THE ARIZONA CORPORATION COMMISSION

FOR THE YEAR ENDING

MONTH	DAY	YEAR
12	31	2010

HAS BEEN PREPARED UNDER MY DIRECTION, FROM THE ORIGINAL BOOKS, PAPERS AND RECORDS OF SAID UTILITY; THAT I HAVE CAREFULLY EXAMINED THE SAME, AND DECLARE THE SAME TO BE A COMPLETE AND CORRECT STATEMENT OF BUSINESS AND AFFAIRS OF SAID UTILITY FOR THE PERIOD COVERED BY THIS REPORT IN RESPECT TO EACH AND EVERY MATTER AND THING SET FORTH, TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

SWORN STATEMENT

IN ACCORDANCE WITH THE REQUIREMENT OF TITLE 40, ARTICLE 8, SECTION 40-401, ARIZONA REVISED STATUTES, IT IS HEREIN REPORTED THAT THE GROSS OPERATING REVENUE OF SAID UTILITY DERIVED FROM ARIZONA INTRASTATE UTILITY OPERATIONS DURING CALENDAR YEAR 2010 WAS:

Arizona Intrastate Gross Operating Revenues Only (\$) <div style="text-align: right; font-size: 1.2em;">\$ <u>4222 -</u></div>

**(THE AMOUNT IN BOX ABOVE
INCLUDES \$ 234 -
IN SALES TAXES BILLED, OR COLLECTED)**

****REVENUE REPORTED ON THIS PAGE MUST INCLUDE SALES TAXES BILLED OR COLLECTED. IF FOR ANY OTHER REASON, THE REVENUE REPORTED ABOVE DOES NOT AGREE WITH TOTAL OPERATING REVENUES ELSEWHERE REPORTED, ATTACH THOSE STATEMENTS THAT RECONCILE THE DIFFERENCE. (EXPLAIN IN DETAIL)**

Neva M. Coester
SIGNATURE OF OWNER OR OFFICIAL
480 396 2718
TELEPHONE NUMBER

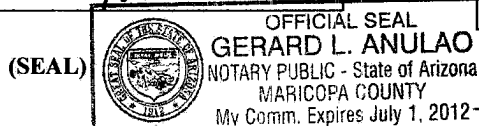
SUBSCRIBED AND SWORN TO BEFORE ME

A NOTARY PUBLIC IN AND FOR THE COUNTY OF

THIS

10th DAY OF

COUNTY NAME <u>Maricopa</u>	
MONTH <u>March</u>	.20 <u>11</u>



Adrian G. Lopez
SIGNATURE OF NOTARY PUBLIC

MY COMMISSION EXPIRES July 1, 2012

**VERIFICATION
AND
SWORN STATEMENT
RESIDENTIAL REVENUE
Intrastate Revenues Only**

VERIFICATION

STATE OF ARIZONA

I, THE UNDERSIGNED

OF THE

COUNTY OF (COUNTY NAME) <u>APACHE</u>	
NAME (OWNER OR OFFICIAL) <u>NEVA M. COESTER</u>	TITLE <u>SECY. / TREAS</u>
COMPANY NAME <u>JACKSON SPRING ESTATES HOME AND PROPERTY OWNERS ASSN.</u>	

DO SAY THAT THIS ANNUAL UTILITY REPORT TO THE ARIZONA CORPORATION COMMISSION

FOR THE YEAR ENDING

MONTH	DAY	YEAR
<u>12</u>	<u>31</u>	<u>2010</u>

HAS BEEN PREPARED UNDER MY DIRECTION, FROM THE ORIGINAL BOOKS, PAPERS AND RECORDS OF SAID UTILITY; THAT I HAVE CAREFULLY EXAMINED THE SAME, AND DECLARE THE SAME TO BE A COMPLETE AND CORRECT STATEMENT OF BUSINESS AND AFFAIRS OF SAID UTILITY FOR THE PERIOD COVERED BY THIS REPORT IN RESPECT TO EACH AND EVERY MATTER AND THING SET FORTH, TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

SWORN STATEMENT

IN ACCORDANCE WITH THE REQUIREMENTS OF TITLE 40, ARTICLE 8, SECTION 40-401.01, ARIZONA REVISED STATUTES, IT IS HEREIN REPORTED THAT THE GROSS OPERATING REVENUE OF SAID UTILITY DERIVED FROM ARIZONA INTRASTATE UTILITY OPERATIONS RECEIVED FROM RESIDENTIAL CUSTOMERS DURING CALENDAR YEAR 2010 WAS:

ARIZONA INTRASTATE GROSS OPERATING REVENUES \$ <u>4222</u>

THE AMOUNT IN BOX AT LEFT
INCLUDES \$ 234 -
IN SALES TAXES BILLED, OR COLLECTED)

***RESIDENTIAL REVENUE REPORTED ON THIS PAGE
MUST INCLUDE SALES TAXES BILLED.**

Neva M. Coester
SIGNATURE OF OWNER OR OFFICIAL
480 996 2718
TELEPHONE NUMBER

SUBSCRIBED AND SWORN TO BEFORE ME

A NOTARY PUBLIC IN AND FOR THE COUNTY OF

THIS

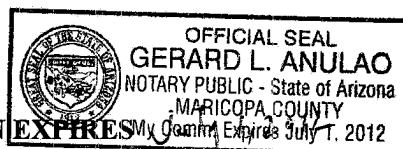
10th

DAY OF

NOTARY PUBLIC NAME <u>GERARD L. ANULAO</u>	
COUNTY NAME <u>MARICOPA</u>	
MONTH <u>MARCH</u>	<u>2011</u>

(SEAL)

MY COMMISSION



EXPIRES

July 1, 2012

GA
SIGNATURE OF NOTARY PUBLIC